

O.C.
11-1500
MR

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID N | DATE |
|---------------------------|------------|--------------|-----------------|
| FEE DETERMINATION | <i>Aug</i> | | <i>9/23/00</i> |
| I.P.E. CLASSIFIER | | <i>72223</i> | <i>9/29/00</i> |
| FORMALITY REVIEW | <i>DM</i> | | <i>11-13-00</i> |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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